

RECEIVED


**Arizona Department of Water Resources**

Groundwater Permitting and Wells Section  
P.O. Box 36020 Phoenix, Arizona 85067-6020  
(602) 771-8527 • (602) 771-8690 fax  
• [www.azwater.gov](http://www.azwater.gov) •

JAN 03 2018

ADWR

**Notice of Intention to  
Abandon a Well**
**FEE  
\$150.00**

- ❖ Review instructions and the Well Abandonment Handbook prior to completing form with black or blue ink.
- ❖ You must include with your Notice:
  - Well construction diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.
- ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104

**TO BE COMPLETED BY ADWR**

AMA/INA PINAL	BASIN P.N	SUBBASIN 11	FILE NUMBER D(4-9)28 CAC
RECEIVED DATE 1-3-2018	WATERSHED 08	WELL REGISTRATION NUMBER	
ISSUED DATE 1-23-2018	REMEDIAL ACTION SITE -	55-806521	

**SECTION 1. REGISTRY INFORMATION**

To determine the location of well, please refer to the Well Registry Map (<https://qisweb.azwater.gov/WellRegistry/Default.aspx>) and Google Earth (<http://www.earthpoint.us/Townships.aspx>)

<b>Well Type</b>		<b>Location of Well</b>						
CHECK ONE		WELL LOCATION ADDRESS (IF ANY) OR CROSS STREETS						
<input type="checkbox"/> Domestic <input type="checkbox"/> Monitor / Piezometer <input type="checkbox"/> Stock <input type="checkbox"/> Geotechnical <input type="checkbox"/> Irrigation <input checked="" type="checkbox"/> Mineral Exploration <input type="checkbox"/> Municipal <input type="checkbox"/> Other (please specify):		TOWNSHIP (N/S) 4.0 S		RANGE (E/W) 9.0 E	SECTION 28	160 ACRE SW 1/4	40 ACRE NE 1/4	10 ACRE SW 1/4
ORIGINAL WELL OWNER (IF KNOWN) Conoco		COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL 1001		COUNTY WHERE WELL IS LOCATED PINAL				
ORIGINAL WELL DRILLING FIRM (IF KNOWN) Unknown		DRILL DATE (IF KNOWN) August 1974		LATITUDE 33 ° 2 ' 58.00 "N Degrees Minutes Seconds		LONGITUDE 111 ° 25 ' 49.00 "W Degrees Minutes Seconds		
		METHOD OF LATITUDE/LONGITUDE (check one) <input type="checkbox"/> *GPS: Hand-Held						
		<input type="checkbox"/> Google Earth <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade						
		*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (check one) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):						

**SECTION 2. OWNER INFORMATION**

<b>Land Owner</b>		<b>Well Owner</b> (check this box if Land Owner and Well Owner are same) <input type="checkbox"/>	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Arizona State Land Department (Mineral Lease #11-026500)		FULL NAME OF COMPANY, GOVERNMENT AGENCY, OR INDIVIDUAL Florence Copper Inc.	
MAILING ADDRESS 1616 W. Adams Street		MAILING ADDRESS 1575 W. Hunt Hwy	
CITY / STATE / ZIP CODE Phoenix, AZ 85007		CITY / STATE / ZIP CODE Florence, Arizona 85123	
CONTACT PERSON NAME AND TITLE Lisa Atkins (State Land Commissioner)		CONTACT PERSON NAME AND TITLE Ian Ream (Senior Hydrogeologist)	
TELEPHONE NUMBER (602) 542-4631	FAX NUMBER	TELEPHONE NUMBER (520) 374-3984	FAX NUMBER (520) 374-3999

**SECTION 3. ABANDONMENT AUTHORIZATION**

<b>Drilling Firm</b>		<b>Consultant</b> (if applicable)	
NAME Layne		CONSULTING FIRM Haley & Aldrich, Inc.	
DWR LICENSE NUMBER 7	ROC LICENSE CATEGORY A-4	CONTACT PERSON NAME Mark Nicholls	
TELEPHONE NUMBER (480) 895-9336	EMAIL ADDRESS scott.graham@layne.com	TELEPHONE NUMBER (602) 760-2423	EMAIL ADDRESS MNicholls@haleyaldrich.com

**SECTION 4.**

Questions	Yes	No	If Yes:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be, or is contaminated?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	EXPLAIN (attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., Lot 3 Well, MW-1, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(please state) DM-B
3. Was the well casing video logged?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	INCLUDE CD OR DVD OF VIDEO LOG WITH NOTICE OF INTENT
4. Why is the well being abandoned?	No longer in use		



# Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER  
**55 - 806521**

## **SECTION 5. ORIGINAL WELL CONSTRUCTION DESIGN** (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)												
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE				PERFORATION TYPE					SLOT SIZE IF ANY (inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	
0	700	Unknown	0	611	5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			611	700	4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Condition of casing: (good, fair, poor, unknown) **UNKNOWN**

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
Unknown		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	

## **SECTION 6. PROPOSED WELL ABANDONMENT DESIGN** (attach additional page if needed)

DATE ABANDONMENT IS TO BEGIN  
**03/01/2017**

Refer to ADWR's [Well Abandonment Handbook](#) for additional information.

Casing Treatment						Sealing or Fill Material														
DEPTH FROM SURFACE		TREATMENT TYPE				IF OTHER TYPE, DESCRIBE OR IF CASING IS TO BE PERFORATED, DESCRIBE SPACING AND SIZE OF PERFORATIONS TO BE ADDED	DEPTH FROM SURFACE		MATERIAL TYPE								MIXING RATIO by (check one) <input type="checkbox"/> Weight <input checked="" type="checkbox"/> Volume	ESTIMATED VOLUME OF MATERIAL (cubic feet)		
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)		FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS BENTONITE	GROUT	CHIPS			PELLETS	SAND
0	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		5	700	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1:1	350
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

### **Proposed Abandonment Method** (See Well Abandonment Handbook)

CHECK ONE  
☐ Standard Method  
☐ Alternative 1  
☐ Alternative 2  
☐ Alternative 3  
☐ Alternative 4:  
☐ Variance Option \*  
☒ Alternative 5:  
☐ Variance Option 1\*  
☐ Variance Option 2\*  
 \* requires a letter requesting a variance

### **Emplacement Method of Sealing or Fill Material**

CHECK ONE  
☒ Tremie Pumped (Recommended)  
☐ Gravity  
☐ Pressure Grouting  
☐ Other (please specify):

APPLICATION CONTINUES ON PAGE 3

**Notice of Intent to Abandon a Well**

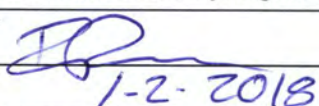
WELL REGISTRATION NUMBER

**55 - 806521****SECTION 7. Well Abandonment Diagram**

Please use the space below to provide a well abandonment diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.

**SECTION 8. LAND OWNER AND WELL OWNER SIGNATURE**

*I state that this notice is filed in compliance with A.R.S. § 45-596 and is complete and correct to the best of my knowledge and belief.*

<b>Land Owner</b>	<b>Well Owner</b> <i>(complete if Land Owner/Well Owner are NOT the same)</i>
PRINT NAME AND TITLE per ASLD Mineral Lease # 11-026500	PRINT NAME AND TITLE Ian Ream, Senior Hydrogeologist
SIGNATURE OF LAND OWNER	SIGNATURE OF WELL OWNER 
DATE	DATE 1-2-2018
<input type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.	<input type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.
EMAIL ADDRESS	EMAIL ADDRESS IanReam@florencecopper.com



Arizona Department of Water Resources  
Groundwater Permitting and Wells  
PO Box 36020 • Phoenix, Arizona 85067-8020  
(602) 771-8527 • 1-800-352-8488

## Well Abandonment Completion Report

- Review instructions prior to completing form
- The drilling firm or single well licensee must file this report within 30 days of completion of abandonment. (A.R.S. § 45-584, A.A.C. R12-15-816)

PLEASE PRINT CLEARLY

FILE NUMBER  
**D(4-B) 28 CAC**  
WELL REGISTRATION NUMBER  
**55-806521**

<b>Mail To:</b>	NAME <b>LAYNE CHRISTENSEN COMPANY</b>	DWR LICENSE NUMBER <b>7</b>
	ADDRESS <b>12030 EAST RIGGS ROAD</b>	TELEPHONE NUMBER <b>480-896-9336</b>
	CITY / STATE / ZIP <b>CHANDLER, AZ 85249-3701</b>	FAX

<b>Well Owner Information</b>			
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL <b>FLORENCE COPPER, INC.</b>		CONTACT PERSON NAME AND TITLE <b>Ian Ream Sr. Geologist</b>	
MAILING ADDRESS <b>1576 W. HUNT HIGHWAY</b>		TELEPHONE NUMBER <b>520-374-3984</b>	
CITY / STATE / ZIP <b>FLORENCE, AZ 85132</b>		FAX <b>520-374-3999</b>	
<b>Location of Well</b>			
WELL LOCATION ADDRESS (IF ANY)		LATITUDE <b>33° 2' 58.00" N</b>	
		LONGITUDE <b>111° 25' 49.00" W</b>	
TOWNSHIP (N/S)	RANGE (E/W)	SECTION	LAND SURFACE ELEVATION AT WELL Feet Above Sea Level
<b>4.0 S</b>	<b>9.0 E</b>	<b>28</b>	
		160 ACRE 40 ACRE 10 ACRE	
		<b>SE 1/4 NE 1/4 SW 1/4</b>	
COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK	MAP	PARCEL	METHOD OF LATITUDE / LONGITUDE (Check One) <input type="checkbox"/> GPS: Hand-Held <input type="checkbox"/> USGS Quad Map <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> GPS: Survey-Grade
			<input type="checkbox"/> GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (Check One) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):

<b>SECTION 2</b>			
Questions	Yes	No	Explanation:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be or is contaminated?		<b>X</b>	IF YES, EXPLAIN (Attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., MW-1, PZ-4, Lot 28 Well, Smith Well, etc.)	<b>X</b>		IF YES, PLEASE STATE <b>DM-B</b>
3. Prior to abandonment, did the well have 20' of surface casing and 20' of grout in the annular space surrounding the casing?		<b>X</b>	IF NO, were the top 20' of casing removed prior to setting the cement plug? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
4. Was the well backfilled above the cement plug?	<b>X</b>		<b>Blast &amp; Perforate 5'-25'</b>
5. Was the well casing video logged?		<b>X</b>	
6. Why was the well abandoned?			
<b>Well is no longer needed</b>			



## Well Abandonment Completion Report

WELL REGISTRATION NUMBER  
55 - 806521

Existing Borehole			Existing Casing (to the best of your knowledge)													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE (T)				PERFORATION TYPE (T)					SLOT SIZE IF ANY (inches)	
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED		IF OTHER TYPE, DESCRIBE
0	700	unknown	0	611	5	X										

Condition of casing: ☐ Good ☐ Fair ☐ Poor

DEPTH FROM SURFACE		Existing Annular Material (to the best of your knowledge)								FILTER PACK		
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
unknown												

Refer to ADWR's Well Abandonment Handbook for additional information										DEPTH TO WATER Feet Below Land Surface		DATE ABANDONMENT COMPLETED	
												2-17-2018	

Casing Treatment						Sealing or Fill Material												
DEPTH FROM SURFACE		TREATMENT TYPE (T)				IF OTHER TYPE, DESCRIBE OR IF CASING WAS PERFORATED, DESCRIBE SPACING AND PERFORATIONS THAT WERE ADDED	DEPTH FROM SURFACE		MATERIAL TYPE (T)						MIXING RATIO by (check one) <input type="checkbox"/> Weight <input checked="" type="checkbox"/> Volume	VOLUME OF MATERIAL USED (cubic feet)		
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)		FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS			SAND	
0	5				X		5	700	X								1:1	350

Actual Abandonment Method (See Well Abandonment Handbook)			Emplacement Method of Sealing or Fill Material	
CHECK ONE <input type="checkbox"/> Standard Method <input type="checkbox"/> Alternative 1 <input type="checkbox"/> Alternative 2 <input type="checkbox"/> Alternative 3 <input type="checkbox"/> Alternative 4 <input checked="" type="checkbox"/> Alternative 5 <input type="checkbox"/> Variance Option 1 <input type="checkbox"/> Variance Option 2			CHECK ONE <input type="checkbox"/> Gravity <input type="checkbox"/> Pressure Grouting <input checked="" type="checkbox"/> Tremie Pumped <input type="checkbox"/> Other (please specify)	

REMARKS

I state that this is filed in compliance with A.R.S. § 45-584 and A.A.C. R12-15-816 and is complete and correct to the best of my knowledge and	
TYPE OR PRINT NAME AND TITLE <u>Scott Graham</u>	SIGNATURE OF QUALIFYING PARTY <u>[Signature]</u> DATE <u>3/12/18</u>

**ARIZONA DEPARTMENT OF WATER RESOURCES**  
1110 W. Washington St. Suite 310  
Phoenix, Arizona 85007

**ABANDON  
VARIANCE GRANTED**

THIS AUTHORIZATION SHALL BE IN POSSESSION OF THE DRILLER DURING ALL DRILLING OPERATIONS

WELL REGISTRATION NO: **55-806521** WELL OWNER ID: DM-B

AUTHORIZED DRILLER: **LAYNE CHRISTENSEN COMPANY**

LICENSE NO: **7**

NOTICE OF INTENTION TO ABANDON EXEMPT WELL(S) HAS BEEN FILED WITH THE DEPARTMENT BY:

WELL OWNER: **FLORENCE COPPER INC 1575 W HUNT HWY FLORENCE, AZ, 85132**

THE WELL(S) IS/ARE TO BE LOCATED IN THE:

**SW 1/4 of the NE 1/4 of the SW 1/4 Section 28 Township 4.0 SOUTH Range 9.0 EAST**

NO. OF WELLS IN THIS PROJECT: **1**

THIS AUTHORIZATION EXPIRES AT MIDNIGHT ON THE DAY OF

*Sella Murillo*

**GROUNDWATER PERMITTING AND WELLS**

THE DRILLER MUST FILE A WELL ABANDONMENT COMPLETION REPORT WITHIN 30 DAYS OF ABANDONMENT.





**Arizona Department of Water Resources**

Groundwater Permitting and Wells Section  
P.O. Box 36020 Phoenix, Arizona 85067-6020  
(602) 771-8527 • (602) 771-8690 fax  
• [www.azwater.gov](http://www.azwater.gov) •

RECEIVED

MAY 02 2018

ADWR

**Notice of Intention to  
Abandon a Well**
**FEE**  
**\$150.00**

- ❖ Review instructions and the Well Abandonment Handbook prior to completing form with black or blue ink.
- ❖ You must include with your Notice:
  - Well construction diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.
- ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104

TO BE COMPLETED BY ADWR		FILE NUMBER
AMA/INA PINAL	BASIN PIN	11
RECEIVED DATE 5/2/18	WATERSHED 08	WELL REGISTRATION NUMBER 55-627641
ISSUED DATE 5/4/18	REMEDIAL ACTION SITE —	

**SECTION 1. REGISTRY INFORMATION**

To determine the location of well, please refer to the Well Registry Map (<https://gisweb.azwater.gov/WellRegistry/Default.aspx>) and Google Earth (<http://www.earthpoint.us/Townships.aspx>)

Well Type	Location of Well																		
CHECK ONE	WELL LOCATION ADDRESS (IF ANY) OR CROSS STREETS																		
<input type="checkbox"/> Domestic <input type="checkbox"/> Monitor / Piezometer <input type="checkbox"/> Stock <input type="checkbox"/> Geotechnical <input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Mineral Exploration <input type="checkbox"/> Municipal <input type="checkbox"/> Other (please specify):	<table border="1"> <tr> <th>TOWNSHIP (N/S)</th> <th>RANGE (E/W)</th> <th>SECTION</th> <th>160 ACRE</th> <th>40 ACRE</th> <th>10 ACRE</th> </tr> <tr> <td>4.0 S</td> <td>9.0 E</td> <td>28</td> <td>SW ¼</td> <td>SE ¼</td> <td>NW ¼</td> </tr> </table>	TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE	4.0 S	9.0 E	28	SW ¼	SE ¼	NW ¼						
TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE														
4.0 S	9.0 E	28	SW ¼	SE ¼	NW ¼														
ORIGINAL WELL OWNER (IF KNOWN) Conoco	COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK 200 MAP 31 PARCEL 0200																		
ORIGINAL WELL DRILLING FIRM (IF KNOWN) UNKNOWN	COUNTY WHERE WELL IS LOCATED PINAL																		
DRILL DATE (IF KNOWN) Prior to 1968	<table border="1"> <tr> <th colspan="3">LATITUDE</th> <th colspan="3">LONGITUDE</th> </tr> <tr> <td>33 °</td> <td>2 ' 53.95 "N</td> <td>111 °</td> <td>26 ' 3.18 "W</td> <td></td> <td></td> </tr> <tr> <td>Degrees</td> <td>Minutes</td> <td>Seconds</td> <td>Degrees</td> <td>Minutes</td> <td>Seconds</td> </tr> </table>	LATITUDE			LONGITUDE			33 °	2 ' 53.95 "N	111 °	26 ' 3.18 "W			Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
LATITUDE			LONGITUDE																
33 °	2 ' 53.95 "N	111 °	26 ' 3.18 "W																
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds														
	METHOD OF LATITUDE/LONGITUDE (check one) <input type="checkbox"/> *GPS: Hand-Held <input type="checkbox"/> Google Earth <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade *IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (check one) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):																		

**SECTION 2. OWNER INFORMATION**

Land Owner	Well Owner (check this box if Land Owner and Well Owner are same) <input checked="" type="checkbox"/>
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Florence Copper Inc.	FULL NAME OF COMPANY, GOVERNMENT AGENCY, OR INDIVIDUAL Florence Copper Inc.
MAILING ADDRESS 1575 W. Hunt Hwy	MAILING ADDRESS 1575 W. Hunt Hwy
CITY / STATE / ZIP CODE Florence, Arizona 85123	CITY / STATE / ZIP CODE Florence, Arizona 85123
CONTACT PERSON NAME AND TITLE Ian Ream (Senior Hydrogeologist)	CONTACT PERSON NAME AND TITLE Ian Ream (Senior Hydrogeologist)
TELEPHONE NUMBER (520) 374-3984	TELEPHONE NUMBER (520) 374-3984
FAX NUMBER (520) 374-3999	FAX NUMBER (520) 374-3999

**SECTION 3. ABANDONMENT AUTHORIZATION**

Drilling Firm	Consultant (if applicable)
NAME Hoover Drilling LLC	CONSULTING FIRM Haley & Aldrich, Inc.
DWR LICENSE NUMBER 871	CONTACT PERSON NAME Lauren Candreva
TELEPHONE NUMBER (520) 251-1449	TELEPHONE NUMBER (602) 760-2429
ROC LICENSE CATEGORY CR-53	EMAIL ADDRESS lcandreva@haleyaldrich.com
EMAIL ADDRESS tommy@hooverdrilling.com	

**SECTION 4.**

Questions	Yes	No	If Yes:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be, or is contaminated?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	EXPLAIN (attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., Lot 3 Well, MW-1, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(please state) MF-2
3. Was the well casing video logged?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	INCLUDE CD OR DVD OF VIDEO LOG WITH NOTICE OF INTENT
4. Why is the well being abandoned?	No longer in use		



# Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER  
55 - 627641

## SECTION 5. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE				PERFORATION TYPE					SLOT SIZE IF ANY (inches)	
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED		IF OTHER TYPE, DESCRIBE
0	520	Unknown	0	185	20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
			185	520	20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Condition of casing: (good, fair, poor, unknown) POOR

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE							FILTER PACK		
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE GROUT	CHIPS	PELLETS	IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	UNKNOWN	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	FILL AT 445, WILL BE BAILED OUT TO 487	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

## SECTION 6. PROPOSED WELL ABANDONMENT DESIGN (attach additional page if needed)

DATE ABANDONMENT IS TO BEGIN

Refer to ADWR's [Well Abandonment Handbook](#) for additional information.

Casing Treatment						Sealing or Fill Material													
DEPTH FROM SURFACE		TREATMENT TYPE					DEPTH FROM SURFACE		MATERIAL TYPE								MIXING RATIO by (check one) <input type="checkbox"/> Weight <input checked="" type="checkbox"/> Volume	ESTIMATED VOLUME OF MATERIAL (cubic feet)	
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)	IF OTHER TYPE, DESCRIBE OR IF CASING IS TO BE PERFORATED, DESCRIBE SPACING AND SIZE OF PERFORATIONS TO BE ADDED	FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS BENTONITE					SAND
														GROUT	CHIPS	PELLETS			
0	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		5	487	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1:1	1051.5
5	25	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
260	437	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	BLAST PERFORATE			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

### Proposed Abandonment Method (See Well Abandonment Handbook)

- CHECK ONE
- ☐ Standard Method ☐ Alternative 4: ☐ Other (please specify):
- ☐ Alternative 1 ☐ Variance Option \*
- ☐ Alternative 2 ☒ Alternative 5: ☐ Variance Option 1\* \* requires a letter requesting a variance
- ☐ Alternative 3 ☐ Variance Option 2\*

### Emplacement Method of Sealing or Fill Material

- CHECK ONE
- ☒ Tremie Pumped (Recommended)
- ☐ Gravity
- ☐ Pressure Grouting
- ☐ Other (please specify):

APPLICATION CONTINUES ON PAGE 3



**Notice of Intent to Abandon a Well**


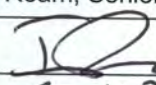
WELL REGISTRATION NUMBER

**55 - 627641****SECTION 7. Well Abandonment Diagram**

Please use the space below to provide a well abandonment diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.

**SECTION 8. LAND OWNER AND WELL OWNER SIGNATURE**

*I state that this notice is filed in compliance with A.R.S. § 45-596 and is complete and correct to the best of my knowledge and belief.*

Land Owner	Well Owner (complete if Land Owner/Well Owner are NOT the same)
PRINT NAME AND TITLE Ian Ream, Senior Hydrogeologist	PRINT NAME AND TITLE Ian Ream, Senior Hydrogeologist
SIGNATURE OF LAND OWNER 	SIGNATURE OF WELL OWNER 
DATE 5-1-2018	DATE 5-1-2018
<input type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.	<input checked="" type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.
EMAIL ADDRESS	EMAIL ADDRESS IanReam@florencecopper.com



## Well Abandonment Completion Report

- ❖ Review instructions prior to completing form in black or blue ink.
- ❖ The drilling firm or single well licensee must file this report within 30 days of completion of abandonment. (A.R.S. § 45-594, A.A.C. R12-15-816)

\*\* PLEASE PRINT CLEARLY \*\*

FILE NUMBER

WELL REGISTRATION NUMBER

**55 - 627641**

### SECTION 1. ABANDONMENT AUTHORIZATION

#### Drilling Firm

<b>Mail To:</b>	NAME <b>Hoover Drilling LLC</b>	DWR LICENSE NUMBER <b>871</b>
	ADDRESS <b>1203 N Schultz St b</b>	TELEPHONE NUMBER <b>(520) 836-6400</b>
	CITY / STATE / ZIP <b>Casa Grande, AZ 85122</b>	FAX

### SECTION 2. REGISTRY INFORMATION

#### Well Owner Information

FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL <b>Florence Copper Inc.</b>	CONTACT PERSON NAME AND TITLE <b>Ian Ream (Senior Hydrogeologist)</b>
MAILING ADDRESS <b>1575 W. Hunt Hwy</b>	TELEPHONE NUMBER <b>(520) 374-3984</b>
CITY / STATE / ZIP CODE <b>Florence, Arizona 85123</b>	FAX <b>(520) 374-3999</b>

#### Location of Well

WELL LOCATION ADDRESS (IF ANY)						LATITUDE <b>33° 2' 53.95"N</b> Degrees Minutes Seconds			LONGITUDE <b>111° 26' 3.18"W</b> Degrees Minutes Seconds		
TOWNSHIP (N/S) <b>4 S</b>	RANGE (E/W) <b>9 E</b>	SECTION <b>28</b>	160 ACRE <b>SW 1/4</b>	40 ACRE <b>SE 1/4</b>	10 ACRE <b>NW 1/4</b>	LAND SURFACE ELEVATION AT WELL Feet Above Sea Level					
COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK <b>200</b> MAP <b>31</b> PARCEL <b>0200</b>						METHOD OF LATITUDE/LONGITUDE (CHECK ONE) <input type="checkbox"/> *GPS: Hand-Held <input type="checkbox"/> USGS Quad Map <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade *IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (CHECK ONE) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):					

### SECTION 3.

Questions	Yes	No	Explanation:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be or is contaminated?		<input checked="" type="checkbox"/>	IF YES, EXPLAIN (ATTACH ADDITIONAL PAGE IF NECESSARY)
2. Is there another well name or identification number associated with this well? (e.g., MW-1, PZ-4, Lot 29 Well, Smith Well, etc.)	<input checked="" type="checkbox"/>		IF YES, PLEASE STATE <b>MF-2</b>
3. Prior to abandonment, did the well have 20' of surface casing AND 20' of grout in the annular space surrounding the casing?		<input checked="" type="checkbox"/>	If no, was the top 20' of casing removed prior to setting the cement plug? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No *Top 20' perforated
4. Was the well backfilled above the cement plug?	<input checked="" type="checkbox"/>		
5. Was the well casing video logged?	<input checked="" type="checkbox"/>		
6. Why was the well abandoned?	<b>No longer in use</b>		



## Well Abandonment Completion Report

WELL REGISTRATION NUMBER

55 -627647

**SECTION 4. ORIGINAL WELL CONSTRUCTION DESIGN** (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)														
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE ( T )			PERFORATION TYPE ( T )					SLOT SIZE IF ANY (inches)			
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE		SLOTTED	IF OTHER TYPE, DESCRIBE	
0	520	Unknown	0	185	20	x											
			185	520	20	x								x			

Condition of casing: ☐ Good ☐ Fair ☒ Poor**Existing Annular Material** (to the best of your knowledge)

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE ( T )								FILTER PACK		
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
									Unknown			

**SECTION 5. ACTUAL WELL ABANDONMENT DESIGN** (attach additional page if needed)

Refer to ADWR's Well Abandonment Handbook for additional information.

DEPTH TO WATER

230

Feet Below Land Surface

DATE ABANDONMENT COMPLETED

5/23/2018

Casing Treatment						Sealing or Fill Material													
DEPTH FROM SURFACE		TREATMENT TYPE ( T )				DEPTH FROM SURFACE		MATERIAL TYPE ( T )								MIXING RATIO by (check one) <input type="checkbox"/> Weight <input checked="" type="checkbox"/> Volume	VOLUME OF MATERIAL USED (cubic feet)		
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)	IF OTHER TYPE, DESCRIBE OR IF CASING WAS PERFORATED, DESCRIBE SPACING AND SIZE OF PERFORATIONS THAT WERE ADDED	FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	GROUT	CHIPS			PELLETS	SAND
0	5				X		5	467	X									1:1	2266
5	25			X															
250	467				X	Blast Perforate													

**Actual Abandonment Method** (See Well Abandonment Handbook)

CHECK ONE

- ☐ Standard Method    ☐ Alternative 4:    ☐ Other (please specify):  
☐ Alternative 1    ☐ Variance Option  
☐ Alternative 2    ☒ Alternative 5: Blast Perforate  
☐ Alternative 3    ☐ Variance Option 1  
☐ Variance Option 2

**Emplacement Method of Sealing or Fill Material**

CHECK ONE

- ☐ Gravity  
☐ Pressure Grouting  
☒ Tremie Pumped  
☐ Other (please specify):

REMARKS

I state that this notice is filed in compliance with A.R.S. § 45-594 and A.A.C. R12-15-816 and is complete and correct to the best of my knowledge and belief.

TYPE OR PRINT NAME AND TITLE

Tommy Hoover (Owner)

SIGNATURE OF QUALIFYING PARTY

DATE

**ARIZONA DEPARTMENT OF WATER RESOURCES**  
1110 W. Washington St. Suite 310  
Phoenix, Arizona 85007

**ABANDON  
VARIANCE GRANTED**

THIS AUTHORIZATION SHALL BE IN POSSESSION OF THE DRILLER DURING ALL DRILLING OPERATIONS

WELL REGISTRATION NO: **55-627641** WELL OWNER ID: mf-2

AUTHORIZED DRILLER: **HOOVER DRILLING COMPANY, LLC**

LICENSE NO: **871**

NOTICE OF INTENTION TO ABANDON EXEMPT WELL(S) HAS BEEN FILED WITH THE DEPARTMENT BY:

WELL OWNER: **FLORENCE COPPER INC 1575 W HUNT HWY FLORENCE, AZ, 85132**

THE WELL(S) IS/ARE TO BE LOCATED IN THE:

**NW 1/4 of the SE 1/4 of the SW 1/4 Section 28 Township 4.0 SOUTH Range 9.0 EAST**

NO. OF WELLS IN THIS PROJECT: **1**

ASSESSOR'S PARCEL NO: **200-31-0200**

THIS AUTHORIZATION EXPIRES AT MIDNIGHT ON THE DAY OF

*Sella Murillo*

**GROUNDWATER PERMITTING AND WELLS**

THE DRILLER MUST FILE A WELL ABANDONMENT COMPLETION REPORT WITHIN 30 DAYS OF ABANDONMENT.





**Arizona Department of Water Resources**

Groundwater Permitting and Wells Section  
P.O. Box 36020 Phoenix, Arizona 85067-6020  
(602) 771-8527 • (602) 771-8690 fax  
• [www.azwater.gov](http://www.azwater.gov) •

**Notice of Intention to  
Abandon a Well****FEE  
\$150.00**

- ❖ Review instructions and the Well Abandonment Handbook prior to completing form with black or blue ink.
- ❖ You must include with your Notice:
  - Well construction diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.
- ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104

TO BE COMPLETED BY ADWR			FILE NUMBER
AMA/INA	BASIN	SUBBASIN	004-928CAC
RECEIVED DATE 3/2/17	WATERSHED		WELL REGISTRATION NUMBER
ISSUED DATE 3/16/17	REMEDIAL ACTION SITE		55- 482740

**SECTION 1. REGISTRY INFORMATION**

To determine the location of well, please refer to the Well Registry Map (<https://gisweb.azwater.gov/WellRegistry/Default.aspx>) and Google Earth (<http://www.earthpoint.us/Townships.aspx>)

Well Type		Location of Well						
CHECK ONE		WELL LOCATION ADDRESS (IF ANY) OR CROSS STREETS						
<input type="checkbox"/> Domestic <input checked="" type="checkbox"/> Monitor / Piezometer <input type="checkbox"/> Stock <input type="checkbox"/> Geotechnical <input type="checkbox"/> Irrigation <input type="checkbox"/> Mineral Exploration <input type="checkbox"/> Municipal <input type="checkbox"/> Other (please specify):		TOWNSHIP (N/S)		RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE
		4.0 S		9.0 E	28	SW 1/4	NE 1/4	SW 1/4
ORIGINAL WELL OWNER (IF KNOWN) Magma		COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL			COUNTY WHERE WELL IS LOCATED			
		1001			PINAL			
ORIGINAL WELL DRILLING FIRM (IF KNOWN) Unknown		DRILL DATE (IF KNOWN) 1994		LATITUDE 33 °    3 '    1.88 "N		LONGITUDE 111 °    26 '    4.87 "W		
				Degrees    Minutes    Seconds		Degrees    Minutes    Seconds		
		METHOD OF LATITUDE/LONGITUDE (check one) <input type="checkbox"/> *GPS: Hand-Held						
		<input type="checkbox"/> Google Earth <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade						
		*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (check one)						
		<input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):						

**SECTION 2. OWNER INFORMATION**

Land Owner	Well Owner (check this box if Land Owner and Well Owner are same) <input type="checkbox"/>
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Arizona State Land Department (Mineral Lease #11-026500)	FULL NAME OF COMPANY, GOVERNMENT AGENCY, OR INDIVIDUAL Florence Copper Inc.
MAILING ADDRESS 1616 W. Adams Street	MAILING ADDRESS 1575 W. Hunt Hwy
CITY / STATE / ZIP CODE Phoenix, AZ 85007	CITY / STATE / ZIP CODE Florence, Arizona 85123
CONTACT PERSON NAME AND TITLE Lisa Atkins (State Land Commissioner)	CONTACT PERSON NAME AND TITLE Ian Ream (Senior Hydrogeologist)
TELEPHONE NUMBER (602) 542-4631	TELEPHONE NUMBER (520) 374-3984
FAX NUMBER	FAX NUMBER (520) 374-3999

**SECTION 3. ABANDONMENT AUTHORIZATION**

Drilling Firm		Consultant (if applicable)	
NAME National EWP, INC		CONSULTING FIRM Haley & Aldrich, Inc.	
DWR LICENSE NUMBER 823	ROC LICENSE CATEGORY A-4	CONTACT PERSON NAME Mark Nicholls	
TELEPHONE NUMBER (480) 558-3500	EMAIL ADDRESS jstephens@nationalewp.com	TELEPHONE NUMBER (602) 760-2423	EMAIL ADDRESS MNicholls@haleyaldrich.com

**SECTION 4.**

Questions	Yes	No	If Yes:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be, or is contaminated?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	EXPLAIN (attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., Lot 3 Well, MW-1, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(please state) OB3-1
3. Was the well casing video logged?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	INCLUDE CD OR DVD OF VIDEO LOG WITH NOTICE OF INTENT
4. Why is the well being abandoned?	No longer in use		

**RECEIVED****MAR 03 2017****ADWR**



# Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER  
55 - 482740

## SECTION 5. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE				PERFORATION TYPE					SLOT SIZE IF ANY (inches)	
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED		IF OTHER TYPE, DESCRIBE
0	20	Unknown	0	20	12	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
20	800	9 5/8	0	500	4	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
			500	800	4	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	bottom 20 feet blank	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		unknown

Condition of casing: (good, fair, poor, unknown) FAIR

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
20	500	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	0-20 feet cement grout	<input type="checkbox"/>	<input type="checkbox"/>	
500	505	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	Fine
505	800	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	unknown size filter pack	<input checked="" type="checkbox"/>	<input type="checkbox"/>	filter pack

## SECTION 6. PROPOSED WELL ABANDONMENT DESIGN (attach additional page if needed)

DATE ABANDONMENT IS TO BEGIN

Refer to ADWR's [Well Abandonment Handbook](#) for additional information.

Casing Treatment						Sealing or Fill Material														
DEPTH FROM SURFACE		TREATMENT TYPE				IF OTHER TYPE, DESCRIBE OR IF CASING IS TO BE PERFORATED, DESCRIBE SPACING AND SIZE OF PERFORATIONS TO BE ADDED	DEPTH FROM SURFACE		MATERIAL TYPE								MIXING RATIO by (check one) <input type="checkbox"/> Weight <input checked="" type="checkbox"/> Volume	ESTIMATED VOLUME OF MATERIAL (cubic feet)		
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)		FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS BENTONITE	GROUT	CHIPS			PELLETS	SAND
0	470	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		5	800	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1:1	266
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

### Proposed Abandonment Method (See Well Abandonment Handbook)

CHECK ONE

☐ Standard Method    ☐ Alternative 4:    ☐ Other (please specify):

☐ Alternative 1    ☐ Variance Option \*

☐ Alternative 2    ☒ Alternative 5:

☐ Alternative 3    ☐ Variance Option 1\*    \* requires a letter requesting a variance

☐ Variance Option 2\*

### Emplacement Method of Sealing or Fill Material

CHECK ONE

☒ Tremie Pumped (Recommended)

☐ Gravity

☐ Pressure Grouting

☐ Other (please specify):

APPLICATION CONTINUES ON PAGE 3



**Notice of Intent to Abandon a Well**

WELL REGISTRATION NUMBER

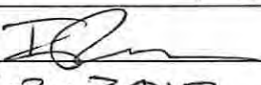
55 - 482740

**SECTION 7. Well Abandonment Diagram**

Please use the space below to provide a well abandonment diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.

**SECTION 8. LAND OWNER AND WELL OWNER SIGNATURE**

I state that this notice is filed in compliance with A.R.S. § 45-596 and is complete and correct to the best of my knowledge and belief.

Land Owner	Well Owner (complete if Land Owner/Well Owner are NOT the same)
PRINT NAME AND TITLE	PRINT NAME AND TITLE Ian Ream, Senior Hydrogeologist
SIGNATURE OF LAND OWNER	SIGNATURE OF WELL OWNER 
DATE	DATE 3-2-2017
<input type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.	<input checked="" type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.
EMAIL ADDRESS	EMAIL ADDRESS IanReam@florencecopper.com

**ARIZONA DEPARTMENT OF WATER RESOURCES**  
1110 W. Washington St. Suite 310  
Phoenix, Arizona 85007

**ABANDON  
VARIANCE GRANTED**

THIS AUTHORIZATION SHALL BE IN POSSESSION OF THE DRILLER DURING ALL DRILLING OPERATIONS

WELL REGISTRATION NO: **55-482740**

AUTHORIZED DRILLER: **NATIONAL EWP, INC.**

LICENSE NO: **823**

NOTICE OF INTENTION TO ABANDON ENV - MONITOR WELL(S) HAS BEEN FILED WITH THE DEPARTMENT BY:

WELL OWNER: **FLORENCE COPPER, INC. 1575 W. HUNT HIGHWAY ATTN: IAN REAM, SR. HYDROGEOLOGIST FLORENCE, AZ, 85**

THE WELL(S) IS/ARE TO BE LOCATED IN THE:

**SW 1/4 of the NE 1/4 of the SW 1/4 Section 28 Township 4.0 SOUTH Range 9.0 EAST**

NO. OF WELLS IN THIS PROJECT:

THIS AUTHORIZATION EXPIRES AT MIDNIGHT ON THE DAY OF



---

**GROUNDWATER PERMITTING AND WELLS**

THE DRILLER MUST FILE A WELL ABANDONMENT COMPLETION REPORT WITHIN 30 DAYS OF  
ABANDONMENT.





NP



**Arizona Department of Water Resources**  
Groundwater Permitting and Wells  
PO Box 36020 • Phoenix, Arizona 85067-6020  
(602) 771-8527 • 1-800-352-8488

**RECEIVED**  
**Well Abandonment Completion Report**  
**APR 23 2018**

- ❖ Review instructions prior to completing form
- ❖ The drilling firm or single well licensee must file this report within 30 days of completion of abandonment. (A.R.S. § 45-594, A.A.C. R12-15-816)

ADWR

FILE NUMBER

**D(4-9) 28 CAC**

WELL REGISTRATION NUMBER

**55 - 482740**

\*\* PLEASE PRINT CLEARLY \*\*

**SECTION 1. ABANDONMENT AUTHORIZATION**

Drilling Firm	
Mail To:	NAME NATIONAL EWP, INC.
	ADDRESS 1200 W. SAN PEDRO ST.
	CITY / STATE / ZIP GILBERT, AZ 85233
	DWR LICENSE NUMBER 823
	TELEPHONE NUMBER 480-558-3500
	FAX

**SECTION 2. REGISTRY INFORMATION**

Well Owner Information	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL FLORENCE COPPER, INC.	CONTACT PERSON NAME AND TITLE Ian Ream Sr. Hydrogeologist
MAILING ADDRESS 1575 W. HUNT HIGHWAY	TELEPHONE NUMBER 520-374-3984
CITY / STATE / ZIP FLORENCE, AZ 85132	FAX 520-374-3999
Location of Well	
WELL LOCATION ADDRESS (IF ANY)	LATITUDE 33 ° 3 ' 1.88 " N Degrees Minutes Seconds
	LONGITUDE 111 ° 26 ' 4.87 " W Degrees Minutes Seconds
TOWNSHIP (N/S) 4S	RANGE (E/W) 9E
SECTION 28	160 ACRE SW 1/4
	40 ACRE NE 1/4
	10 ACRE SW 1/4
LAND SURFACE ELEVATION AT WELL 1475 Feet Above Sea Level	
METHOD OF LATITUDE / LONGITUDE (Check One) <input type="checkbox"/> GPS: Hand-Held	
<input type="checkbox"/> USGS Quad Map <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> GPS: Survey-Grade	
*If GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (Check One)	
<input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):	
COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK	MAP
	PARCEL

**SECTION 3.**

Questions	Yes	No	Explanation:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be or is contaminated?		X	IF YES, EXPLAIN (Attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., MW-1, PZ-4, Lot 29 Well, Smith Well, etc.)	X		IF YES, PLEASE STATE OB3-1
3. Prior to abandonment, did the well have 20' of surface casing and 20' of grout in the annular space surrounding the casing?	X		If no, was the top 20' of casing removed prior to setting the cement plug? <input type="checkbox"/> Yes <input type="checkbox"/> No
4. Was the well backfilled above the cement plug?	X		
5. Was the well casing video logged?		X	
6. Why was the well abandoned?  No longer needed.			



## Well Abandonment Completion Report

WELL REGISTRATION NUMBER  
**55 - 482740****SECTION 4. ORIGINAL WELL CONSTRUCTION DESIGN** (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE (T)				PERFORATION TYPE (T)						SLOT SIZE IF ANY (inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	IF OTHER TYPE, DESCRIBE	
0	20	Unknown	0	20	12	X				X						
20	800	9 5/8	0	500	4		X			X						
			500	800	4		X							X		

Condition of casing: ☐ Good ☒ Fair ☐ Poor**Existing Annular Material** (to the best of your knowledge)

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE (T)							FILTER/PAK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
20	500					X			0-20 Cement Grout			
500	505									X		Fine
505	800									X		Filter Pack

**SECTION 5. ACTUAL WELL ABANDONMENT DESIGN** (attach additional page if needed)

Refer to ADWR's Well Abandonment Handbook for additional information

DEPTH TO WATER

N/A

Feet Below Land Surface

DATE ABANDONMENT COMPLETED

5/31/17

Casing Treatment						Sealing or Fill Material														
DEPTH FROM SURFACE		TREATMENT TYPE (T)					DEPTH FROM SURFACE		MATERIAL TYPE (T)								MIXING RATIO by (check one) <input checked="" type="checkbox"/> Weight <input type="checkbox"/> Volume	VOLUME OF MATERIAL USED (cubic feet)		
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)	IF OTHER TYPE, DESCRIBE OR IF CASING WAS PERFORATED, DESCRIBE SPACING AND PERFORATIONS THAT WERE ADDED	FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS					SAND	
0	470				X		5	800	X										15:6	322

**Actual Abandonment Method** (See Well Abandonment Handbook)**Emplacement Method of Sealing or Fill Material**

CHECK ONE

☐ Standard Method☐ Alternative 1☐ Alternative 2☐ Alternative 3☐ Alternative 4☐ Variance Option☒ Alternative 5☐ Variance Option 1☐ Variance Option 2

Letter attached.

☐ Other (please specify)

CHECK ONE

☐ Gravity☐ Pressure Grouting☒ Tremie Pumped☐ Other (please specify)

REMARKS

I state that this is filed in compliance with A.R.S. § 45-594 and A.A.C. R12-15-816 and is complete and correct to the best of my knowledge and

TYPE OR PRINT NAME AND TITLE

SIGNATURE OF QUALIFYING PARTY

DATE



**Arizona Department of Water Resources**

Groundwater Permitting and Wells Section  
P.O. Box 36020 Phoenix, Arizona 85067-6020  
(602) 771-8527 • (602) 771-8690 fax  
• [www.azwater.gov](http://www.azwater.gov) •

**Notice of Intention to Abandon a Well**

**FEE**  
**\$150.00**

- ❖ Review instructions and the Well Abandonment Handbook prior to completing form with black or blue ink.
- ❖ You must include with your Notice:
  - Well construction diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.
- ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104

TO BE COMPLETED BY ADWR			FILE NUMBER
AMA/INA	BASIN	SUBBASIN	D(4-9) 28CCA
RECEIVED DATE 2/13/17	WATERSHED		WELL REGISTRATION NUMBER
ISSUED DATE 2/15/19	REMEDIAL ACTION SITE		55-542055

**SECTION 1. REGISTRY INFORMATION**

To determine the location of well, please refer to the Well Registry Map (<https://gisweb.azwater.gov/WellRegistry/Default.aspx>) and Google Earth (<http://www.earthpoint.us/Townships.aspx>)

Well Type		Location of Well					
CHECK ONE		WELL LOCATION ADDRESS (IF ANY) OR CROSS STREETS					
<input type="checkbox"/> Domestic <input checked="" type="checkbox"/> Monitor / Piezometer <input type="checkbox"/> Stock <input type="checkbox"/> Geotechnical <input type="checkbox"/> Irrigation <input type="checkbox"/> Mineral Exploration <input type="checkbox"/> Municipal <input type="checkbox"/> Other (please specify):							
ORIGINAL WELL OWNER (IF KNOWN)		TOWNSHIP (N/S)    RANGE (E/W)    SECTION    160 ACRE    40 ACRE    10 ACRE					
		4.0 S    9.0 E    28    SW ¼    SW ¼    NE ¼					
ORIGINAL WELL DRILLING FIRM (IF KNOWN)		COUNTY ASSESSOR'S PARCEL ID NUMBER			COUNTY WHERE WELL IS LOCATED		
Unknown		BOOK    MAP    PARCEL			PINAL		
DRILL DATE (IF KNOWN)		200    31    0200					
1994		LATITUDE			LONGITUDE		
		33 °    2 '    55.75 "N			111 °    26 '    6.16 "W		
		Degrees    Minutes    Seconds			Degrees    Minutes    Seconds		
		METHOD OF LATITUDE/LONGITUDE (check one) <input type="checkbox"/> *GPS: Hand-Held					
		<input type="checkbox"/> Google Earth <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade					
		*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (check one)					
		<input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):					

**SECTION 2. OWNER INFORMATION**

Land Owner	Well Owner (check this box if Land Owner and Well Owner are same) <input type="checkbox"/>
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL	FULL NAME OF COMPANY, GOVERNMENT AGENCY, OR INDIVIDUAL
Florence Copper Inc.	
MAILING ADDRESS	MAILING ADDRESS
1575 W. Hunt Hwy	
CITY / STATE / ZIP CODE	CITY / STATE / ZIP CODE
Florence, Arizona 85132	
CONTACT PERSON NAME AND TITLE	CONTACT PERSON NAME AND TITLE
Ian Ream (Senior Hydrogeologist)	
TELEPHONE NUMBER    FAX NUMBER	TELEPHONE NUMBER    FAX NUMBER
(520) 374-3984    (520) 374-3999	

**SECTION 3. ABANDONMENT AUTHORIZATION**

Drilling Firm	Consultant (if applicable)
NAME	CONSULTING FIRM
National EWP, INC	Haley & Aldrich, Inc.
DWR LICENSE NUMBER	CONTACT PERSON NAME
823	Mark Nicholls
TELEPHONE NUMBER	TELEPHONE NUMBER
(480) 558-3500	(602) 760-2432
ROC LICENSE CATEGORY	EMAIL ADDRESS
A-4	MNicholls@haleyaldrich.com
EMAIL ADDRESS	
jstephens@nationalewp.com	

**SECTION 4.**

Questions	Yes	No	If Yes:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be, or is contaminated?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	EXPLAIN (attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., Lot 3 Well, MW-1, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(please state) OB4-1
3. Was the well casing video logged?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	INCLUDE CD OR DVD OF VIDEO LOG WITH NOTICE OF INTENT
4. Why is the well being abandoned?	No longer in use		

# Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER  
55 - 542055

## SECTION 5. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE				PERFORATION TYPE					SLOT SIZE IF ANY (inches)	
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED		IF OTHER TYPE, DESCRIBE
0	20	Unknown	0	20	12	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
50	800	Unknown	0	445	4	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
			445	800	4	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		0.020

Condition of casing: (good, fair, poor, unknown) FAIR

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	400	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
440	445	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	Fine
445	800	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	No. 12

## SECTION 6. PROPOSED WELL ABANDONMENT DESIGN (attach additional page if needed)

DATE ABANDONMENT IS TO BEGIN

Refer to ADWR's [Well Abandonment Handbook](#) for additional information.

02/15/2017

Casing Treatment					Sealing or Fill Material																
DEPTH FROM SURFACE		TREATMENT TYPE				DEPTH FROM SURFACE		MATERIAL TYPE								MIXING RATIO by (check one) <input type="checkbox"/> Weight <input type="checkbox"/> Volume	ESTIMATED VOLUME OF MATERIAL (cubic feet)				
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)	IF OTHER TYPE, DESCRIBE OR IF CASING IS TO BE PERFORATED, DESCRIBE SPACING AND SIZE OF PERFORATIONS TO BE ADDED	FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS BENTONITE	GROUT			CHIPS	PELLETS	SAND	
0	420	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		5	800	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1:1	245
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

### Proposed Abandonment Method (See Well Abandonment Handbook)

CHECK ONE

- ☐ Standard Method    ☐ Alternative 4:    ☐ Other (please specify):  
☐ Alternative 1        ☐ Variance Option \*  
☐ Alternative 2        ☒ Alternative 5:  
☐ Alternative 3        ☐ Variance Option 1\*    \* requires a letter requesting a variance  
                                 ☐ Variance Option 2\*

### Emplacement Method of Sealing or Fill Material

CHECK ONE

- ☒ Tremie Pumped (Recommended)  
☐ Gravity  
☐ Pressure Grouting  
☐ Other (please specify):

APPLICATION CONTINUES ON PAGE 3



**Notice of Intent to Abandon a Well**

WELL REGISTRATION NUMBER

**55 - 542055****SECTION 7. Well Abandonment Diagram**

Please use the space below to provide a well abandonment diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.

**SECTION 8. LAND OWNER AND WELL OWNER SIGNATURE**

I state that this notice is filed in compliance with A.R.S. § 45-596 and is complete and correct to the best of my knowledge and belief.

Land Owner	Well Owner (complete if Land Owner/Well Owner are NOT the same)
PRINT NAME AND TITLE <i>Ian Beam Hydrogeologist</i>	PRINT NAME AND TITLE <i>Ian Beam Hydrogeologist</i>
SIGNATURE OF LAND OWNER <i>[Signature]</i>	SIGNATURE OF WELL OWNER <i>[Signature]</i>
DATE <i>2-13-17</i>	DATE <i>2-13-17</i>
<input checked="" type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.	<input checked="" type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.
EMAIL ADDRESS <i>Ianbeam@Florenceclapper.com</i>	EMAIL ADDRESS <i>Ianbeam@Florenceclapper.com</i>

**ARIZONA DEPARTMENT OF WATER RESOURCES**  
1110 W. Washington St. Suite 310  
Phoenix, Arizona 85007

**ABANDON**

THIS AUTHORIZATION SHALL BE IN POSSESSION OF THE DRILLER DURING ALL DRILLING OPERATIONS

WELL REGISTRATION NO: **55-542055**

AUTHORIZED DRILLER: **NATIONAL EWP, INC.**

LICENSE NO: **823**

NOTICE OF INTENTION TO ABANDON ENV - MONITOR OR PIEZOMETER WELL(S) HAS BEEN FILED WITH THE DEPARTMENT BY:

WELL OWNER: **FLORENCE COPPER, INC. 1575 W. HUNT HIGHWAY ATTN: IAN REAM, SR. HYDROGEOLOGIST FLORENCE, AZ, 85**

THE WELL(S) IS/ARE TO BE LOCATED IN THE:

**NE** 1/4 of the **SW** 1/4 of the **SW** 1/4 Section **28** Township **4.0** **SOUTH** Range **9.0** **EAST**

NO. OF WELLS IN THIS PROJECT:

ASSESSOR'S PARCEL NO: **200-31-0200**

THIS AUTHORIZATION EXPIRES AT MIDNIGHT ON THE DAY OF



---

**GROUNDWATER PERMITTING AND WELLS**

THE DRILLER MUST FILE A WELL ABANDONMENT COMPLETION REPORT WITHIN 30 DAYS OF ABANDONMENT.





APR 18 2017

ADWR



**Arizona Department of Water Resources**  
Groundwater Permitting and Wells  
PO Box 36020 • Phoenix, Arizona 85067-6020  
(602) 771-8527 • 1-800-352-8488

## Well Abandonment Completion Report

- Review instructions prior to completing form
- The drilling firm or single well licensee must file this report within 30 days of completion of abandonment. (A.R.S. § 45-594, A.A.C. R12-15-816)

\*\* PLEASE PRINT CLEARLY \*\*

FILE NUMBER

D(4-9) 28 CCA

WELL REGISTRATION NUMBER

55 - 542055

### SECTION 1. ABANDONMENT AUTHORIZATION

#### Drilling Firm

Mail To:	NAME	DWR LICENSE NUMBER
	NATIONAL EWP, INC.	823
	ADDRESS	TELEPHONE NUMBER
	1200 W. SAN PEDRO ST.	480-558-3500
	CITY / STATE / ZIP	FAX
	GILBERT, AZ 85233	

### SECTION 2. REGISTRY INFORMATION

#### Well Owner Information

FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL FLORENCE COPPER, INC.	CONTACT PERSON NAME AND TITLE Ian Ream Sr. Hydrologist
MAILING ADDRESS 1575 W. HUNT HIGHWAY	TELEPHONE NUMBER 520-374-3984
CITY / STATE / ZIP FLORENCE, AZ 85132	FAX 520-347-3999

#### Location of Well

WELL LOCATION ADDRESS (IF ANY)						LATITUDE			LONGITUDE		
						33°	2'	55.75"N	111°	26'	6.16"W
						Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE	LAND SURFACE ELEVATION AT WELL					
4S	9E	28	SW 1/4	SW 1/4	NE 1/4	1471.8 Feet Above Sea Level					
COUNTY ASSESSOR'S PARCEL ID NUMBER						METHOD OF LATITUDE / LONGITUDE (Check One) <input type="checkbox"/> GPS: Hand-Held					
BOOK						<input type="checkbox"/> USGS Quad Map <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> GPS: Survey-Grade					
MAP						*If GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (Check One)					
200						<input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):					
PARCEL											
31						0200					

### SECTION 3.

Questions	Yes	No	Explanation:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be or is contaminated?		X	IF YES, EXPLAIN (Attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., MW-1, PZ-4, Lot 29 Well, Smith Well, etc.)	X		IF YES, PLEASE STATE OB4-1
3. Prior to abandonment, did the well have 20' of surface casing and 20' of grout in the annular space surrounding the casing?	X		If no, was the top 20' of casing removed prior to setting the cement plug? <input type="checkbox"/> Yes <input type="checkbox"/> No
4. Was the well backfilled above the cement plug?	X		
5. Was the well casing video logged?	X		
6. Why was the well abandoned?  No longer in use.			

## Well Abandonment Completion Report

WELL REGISTRATION NUMBER  
**55 - 542055**

SECTION 4. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)																
Existing Borehole			Existing Casing (to the best of your knowledge)													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE (T)				PERFORATION TYPE (T)						SLOT SIZE IF ANY (inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	IF OTHER TYPE, DESCRIBE	
0	20	17	0	20	12	x				x						
20	800	unknown	0	440	4		x			x						
			440	800	4		x						x			

Condition of casing: ☒ Good ☐ Fair ☐ Poor

Existing Annular Material (to the best of your knowledge)												
DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE (T)						FILTER PACK				
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	20			x								
0	445					x						
445	800										x	

SECTION 5. ACTUAL WELL ABANDONMENT DESIGN (attach additional page if needed)		
Refer to ADWR's Well Abandonment Handbook for additional information	DEPTH TO WATER Feet Below Land Surface	DATE ABANDONMENT COMPLETED 03.02.2017

Casing Treatment						Sealing or Fill Material														
DEPTH FROM SURFACE		TREATMENT TYPE (T)				IF OTHER TYPE, DESCRIBE OR IF CASING WAS PERFORATED, DESCRIBE SPACING AND PERFORATIONS THAT WERE ADDED	DEPTH FROM SURFACE		MATERIAL TYPE (T)						MIXING RATIO by (check one) <input checked="" type="checkbox"/> Weight <input type="checkbox"/> Volume	VOLUME OF MATERIAL USED (cubic feet)				
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)		FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS						
0	440				x		0	800	x											

Actual Abandonment Method (See Well Abandonment Handbook)			Emplacement Method of Sealing or Fill Material	
CHECK ONE <input checked="" type="checkbox"/> Standard Method <input type="checkbox"/> Alternative 1 <input type="checkbox"/> Alternative 2 <input type="checkbox"/> Alternative 3 <input type="checkbox"/> Alternative 4 <input type="checkbox"/> Variance Option <input type="checkbox"/> Alternative 5 <input type="checkbox"/> Variance Option 1 <input type="checkbox"/> Variance Option 2			CHECK ONE <input type="checkbox"/> Gravity <input type="checkbox"/> Pressure Grouting <input checked="" type="checkbox"/> Tremie Pumped <input type="checkbox"/> Other (please specify)	

## REMARKS

Abandon bottom 440'-800' with neat cement/ Drill PVC from 0'-440' and pump neat cement type V.

I state that this is filed in compliance with A.R.S. § 45-594 and A.A.C. R12-15-816 and is complete and correct to the best of my knowledge and	
TYPE OR PRINT NAME AND TITLE <i>William Eddy</i>	SIGNATURE OF QUALIFYING PARTY <i>[Signature]</i> DATE 4-13-17



<b>Arizona Department of Water Resources</b> Groundwater Permitting and Wells Section P.O. Box 36020 Phoenix, Arizona 85067-6020 (602) 771-8527 • (602) 771-8690 fax • <a href="http://www.azwater.gov">www.azwater.gov</a> •	<b>Notice of Intention to Abandon a Well</b>	<b>FEE \$150.00</b>																
<ul style="list-style-type: none"> <li>❖ Review instructions and the Well Abandonment Handbook prior to completing form with black or blue ink.</li> <li>❖ You <u>must</u> include with your Notice:             <ul style="list-style-type: none"> <li>➢ Well construction diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.</li> </ul> </li> <li>❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104</li> </ul>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: center;">TO BE COMPLETED BY ADWR</th> <th style="text-align: center;">FILE NUMBER</th> </tr> <tr> <td style="width: 33%;">AMA/INA</td> <td style="width: 33%;">BASIN</td> <td style="width: 33%;">SUBBASIN</td> <td style="text-align: center;">D(4-9)28CAC</td> </tr> <tr> <td>RECEIVED DATE 3/21/17</td> <td colspan="2">WATERSHED</td> <td>WELL REGISTRATION NUMBER</td> </tr> <tr> <td>ISSUED DATE 3/6/17</td> <td colspan="2">REMEDIAL ACTION SITE —</td> <td>55- 482741</td> </tr> </table>		TO BE COMPLETED BY ADWR			FILE NUMBER	AMA/INA	BASIN	SUBBASIN	D(4-9)28CAC	RECEIVED DATE 3/21/17	WATERSHED		WELL REGISTRATION NUMBER	ISSUED DATE 3/6/17	REMEDIAL ACTION SITE —		55- 482741
TO BE COMPLETED BY ADWR			FILE NUMBER															
AMA/INA	BASIN	SUBBASIN	D(4-9)28CAC															
RECEIVED DATE 3/21/17	WATERSHED		WELL REGISTRATION NUMBER															
ISSUED DATE 3/6/17	REMEDIAL ACTION SITE —		55- 482741															

SECTION 1. REGISTRY INFORMATION																															
To determine the location of well, please refer to the Well Registry Map ( <a href="https://gisweb.azwater.gov/WellRegistry/Default.aspx">https://gisweb.azwater.gov/WellRegistry/Default.aspx</a> ) and Google Earth ( <a href="http://www.earthpoint.us/Townships.aspx">http://www.earthpoint.us/Townships.aspx</a> )																															
Well Type	Location of Well																														
CHECK ONE  <input type="checkbox"/> Domestic <input checked="" type="checkbox"/> Monitor / Piezometer <input type="checkbox"/> Stock <input type="checkbox"/> Geotechnical <input type="checkbox"/> Irrigation <input type="checkbox"/> Mineral Exploration <input type="checkbox"/> Municipal <input type="checkbox"/> Other (please specify):	WELL LOCATION ADDRESS (IF ANY) OR CROSS STREETS  <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th>TOWNSHIP (N/S)</th> <th>RANGE (E/W)</th> <th>SECTION</th> <th>160 ACRE</th> <th>40 ACRE</th> <th>10 ACRE</th> </tr> <tr> <td>4.0 S</td> <td>9.0 E</td> <td>28</td> <td>SW 1/4</td> <td>NE 1/4</td> <td>SW 1/4</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th>COUNTY ASSESSOR'S PARCEL ID NUMBER</th> <th>COUNTY WHERE WELL IS LOCATED</th> </tr> <tr> <td>BOOK MAP PARCEL</td> <td>PINAL</td> </tr> <tr> <td>1001</td> <td></td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="2">LATITUDE</th> <th colspan="2">LONGITUDE</th> </tr> <tr> <td>33 °</td> <td>3 ' 2.34 "N</td> <td>111 °</td> <td>26 ' 5.06 "W</td> </tr> <tr> <td>Degrees</td> <td>Minutes Seconds</td> <td>Degrees</td> <td>Minutes Seconds</td> </tr> </table> METHOD OF LATITUDE/LONGITUDE (check one) <input type="checkbox"/> *GPS: Hand-Held <input type="checkbox"/> Google Earth <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade *IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (check one) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):	TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE	4.0 S	9.0 E	28	SW 1/4	NE 1/4	SW 1/4	COUNTY ASSESSOR'S PARCEL ID NUMBER	COUNTY WHERE WELL IS LOCATED	BOOK MAP PARCEL	PINAL	1001		LATITUDE		LONGITUDE		33 °	3 ' 2.34 "N	111 °	26 ' 5.06 "W	Degrees	Minutes Seconds	Degrees	Minutes Seconds
TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE																										
4.0 S	9.0 E	28	SW 1/4	NE 1/4	SW 1/4																										
COUNTY ASSESSOR'S PARCEL ID NUMBER	COUNTY WHERE WELL IS LOCATED																														
BOOK MAP PARCEL	PINAL																														
1001																															
LATITUDE		LONGITUDE																													
33 °	3 ' 2.34 "N	111 °	26 ' 5.06 "W																												
Degrees	Minutes Seconds	Degrees	Minutes Seconds																												
ORIGINAL WELL OWNER (IF KNOWN) Magma	DRILL DATE (IF KNOWN) 1994																														

SECTION 2. OWNER INFORMATION	
Land Owner	Well Owner (check this box if Land Owner and Well Owner are same) <input type="checkbox"/>
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Arizona State Land Department (Mineral Lease #11-026500)	FULL NAME OF COMPANY, GOVERNMENT AGENCY, OR INDIVIDUAL Florence Copper Inc.
MAILING ADDRESS 1616 W. Adams Street	MAILING ADDRESS 1575 W. Hunt Hwy
CITY / STATE / ZIP CODE Phoenix, AZ 85007	CITY / STATE / ZIP CODE Florence, Arizona 85123
CONTACT PERSON NAME AND TITLE Lisa Atkins, State Land Commissioner	CONTACT PERSON NAME AND TITLE Ian Ream, Senior Hydrogeologist
TELEPHONE NUMBER      FAX NUMBER (602) 542-4631	TELEPHONE NUMBER      FAX NUMBER (520) 374-3984      (520) 374-3999

SECTION 3. ABANDONMENT AUTHORIZATION			
Drilling Firm	Consultant (if applicable)		
NAME National EWP, INC	CONSULTING FIRM Haley & Aldrich, Inc.		
DWR LICENSE NUMBER 823	CONTACT PERSON NAME Mark Nicholls		
ROC LICENSE CATEGORY A-4	TELEPHONE NUMBER (480) 558-3500	EMAIL ADDRESS jstephens@nationalewp.com	EMAIL ADDRESS MNicholls@haleyaldrich.com

SECTION 4.			
Questions	Yes	No	If Yes:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be, or is contaminated?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	EXPLAIN (attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., Lot 3 Well, MW-1, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(please state) PW3-1
3. Was the well casing video logged?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	INCLUDE CD OR DVD OF VIDEO LOG WITH NOTICE OF INTENT
4. Why is the well being abandoned?	No longer in use		

VARIANCE GRANTED



# Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER  
55 - 482741

## SECTION 5. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE				PERFORATION TYPE					SLOT SIZE IF ANY (inches)	
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED		IF OTHER TYPE, DESCRIBE
0	20	Unknown	0	20	12	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
20	800	Unknown	20	505	6	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
			505	800	6	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	bottom 20 feet blank	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	unknown

Condition of casing: (good, fair, poor, unknown) FAIR

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE							FILTER PACK		
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	GROUT	CHIPS	PELLETS	IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE		
0	500	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	top 20 feet cement grout	<input type="checkbox"/>	<input type="checkbox"/>
500	505	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	Fine
505	800	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	unknown filter pack size	<input checked="" type="checkbox"/>	filter pack

## SECTION 6. PROPOSED WELL ABANDONMENT DESIGN (attach additional page if needed)

DATE ABANDONMENT IS TO BEGIN

Refer to ADWR's [Well Abandonment Handbook](#) for additional information.

03/01/2017

Casing Treatment					Sealing or Fill Material									
DEPTH FROM SURFACE		TREATMENT TYPE				DEPTH FROM SURFACE		MATERIAL TYPE						
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)	IF OTHER TYPE, DESCRIBE OR IF CASING IS TO BE PERFORATED, DESCRIBE SPACING AND SIZE OF PERFORATIONS TO BE ADDED	FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS BENTONITE
0	471	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		5	800	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Proposed Abandonment Method (See Well Abandonment Handbook)

CHECK ONE

- ☐ Standard Method    ☐ Alternative 4:    ☐ Other (please specify):  
☐ Alternative 1    ☐ Variance Option \*  
☐ Alternative 2    ☒ Alternative 5:  
☐ Alternative 3    ☐ Variance Option 1\*    \* requires a letter requesting a variance  
☐ Variance Option 2\*

## Emplacement Method of Sealing or Fill Material

CHECK ONE

- ☒ Tremie Pumped (Recommended)  
☐ Gravity  
☐ Pressure Grouting  
☐ Other (please specify):

APPLICATION CONTINUES ON PAGE 3



# Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER

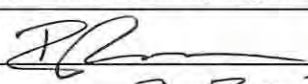
55 - 482741

## SECTION 7. Well Abandonment Diagram

Please use the space below to provide a well abandonment diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.

## SECTION 8. LAND OWNER AND WELL OWNER SIGNATURE

I state that this notice is filed in compliance with A.R.S. § 45-596 and is complete and correct to the best of my knowledge and belief.

Land Owner	Well Owner (complete if Land Owner/Well Owner are NOT the same)
PRINT NAME AND TITLE	PRINT NAME AND TITLE Ian Ream, Senior Hydrogeologist
SIGNATURE OF LAND OWNER	SIGNATURE OF WELL OWNER 
DATE	DATE 3-2-2017
<input type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.	<input checked="" type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.
EMAIL ADDRESS	EMAIL ADDRESS IanReam@florencecopper.com

**ARIZONA DEPARTMENT OF WATER RESOURCES**  
1110 W. Washington St. Suite 310  
Phoenix, Arizona 85007

**ABANDON  
VARIANCE GRANTED**

THIS AUTHORIZATION SHALL BE IN POSSESSION OF THE DRILLER DURING ALL DRILLING OPERATIONS

WELL REGISTRATION NO: **55-482741**

AUTHORIZED DRILLER: **NATIONAL EWP, INC.**

LICENSE NO: **823**

NOTICE OF INTENTION TO ABANDON ENV - MONITOR WELL(S) HAS BEEN FILED WITH THE DEPARTMENT BY:

WELL OWNER: **FLORENCE COPPER, INC. 1575 W. HUNT HIGHWAY ATTN: IAN REAM, SR. HYDROGEOLOGIST FLORENCE, AZ, 85**

THE WELL(S) IS/ARE TO BE LOCATED IN THE:

**SW 1/4 of the NE 1/4 of the SW 1/4 Section 28 Township 4.0 SOUTH Range 9.0 EAST**

NO. OF WELLS IN THIS PROJECT:

THIS AUTHORIZATION EXPIRES AT MIDNIGHT ON THE DAY OF



---

**GROUNDWATER PERMITTING AND WELLS**

THE DRILLER MUST FILE A WELL ABANDONMENT COMPLETION REPORT WITHIN 30 DAYS OF ABANDONMENT.







**Arizona Department of Water Resources**  
Groundwater Permitting and Wells  
PO Box 36020 • Phoenix, Arizona 85067-6020  
(602) 771-8527 • 1-800-352-8488

## Well Abandonment Completion Report

- ❖ Review instructions prior to completing form
- ❖ The drilling firm or single well licensee must file this report within 30 days of completion of abandonment. (A.R.S. § 45-594, A.A.C. R12-15-816)

**\*\* PLEASE PRINT CLEARLY \*\***

FILE NUMBER

**D(4-9) 28 CAC**

WELL REGISTRATION NUMBER

**55 - 482741**

### SECTION 1. ABANDONMENT AUTHORIZATION

#### Drilling Firm

<b>Mail To:</b>	NAME NATIONAL EWP, INC.	DWR LICENSE NUMBER 823	<b>RECEIVED</b>  <b>APR 23 2018</b>  <b>ADWR</b>
	ADDRESS 1200 W. SAN PEDRO ST.	TELEPHONE NUMBER 480-558-3500	
	CITY / STATE / ZIP GILBERT, AZ 85233	FAX	

### SECTION 2. REGISTRY INFORMATION

#### Well Owner Information

FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL FLORENCE COPPER, INC.	CONTACT PERSON NAME AND TITLE Ian Ream Sr. Hydrogeologist
MAILING ADDRESS 1575 W. HUNT HIGHWAY	TELEPHONE NUMBER 520-374-3984
CITY / STATE / ZIP FLORENCE, AZ 85132	FAX 520-374-3999

#### Location of Well

WELL LOCATION ADDRESS (IF ANY)						LATITUDE 33 ° 3 ' 2.34" N Degrees Minutes Seconds			LONGITUDE 111 ° 26 ' 5.06" W Degrees Minutes Seconds		
TOWNSHIP (N/S) 4S	RANGE (E/W) 9E	SECTION 28	160 ACRE SW 1/4	40 ACRE NE 1/4	10 ACRE SW 1/4	LAND SURFACE ELEVATION AT WELL 1475 Feet Above Sea Level					
COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL						METHOD OF LATITUDE / LONGITUDE (Check One) <input type="checkbox"/> GPS: Hand-Held <input type="checkbox"/> USGS Quad Map <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> GPS: Survey-Grade					
						*If GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (Check One) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):					

### SECTION 3.

Questions	Yes	No	Explanation:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be or is contaminated?		X	IF YES, EXPLAIN (Attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., MW-1, PZ-4, Lot 29 Well, Smith Well, etc.)	X		IF YES, PLEASE STATE PW3-1
3. Prior to abandonment, did the well have 20' of surface casing and 20' of grout in the annular space surrounding the casing?	X		If no, was the top 20' of casing removed prior to setting the cement plug? <input type="checkbox"/> Yes <input type="checkbox"/> No
4. Was the well backfilled above the cement plug?	X		
5. Was the well casing video logged?		X	
6. Why was the well abandoned?  No longer in use.			



## Well Abandonment Completion Report

WELL REGISTRATION NUMBER  
**55 - 482741**

SECTION 4. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)															
Existing Borehole			Existing Casing (to the best of your knowledge)												
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE (T)				PERFORATION TYPE (T)					SLOT SIZE IF ANY (inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	
0	20	unknown	0	20	12	X				X					
20	800	unknown	20	505	6		X			X					
			505	800	6		X				bottom 20' blank	X			unknown

Condition of casing: ☐ Good ☒ Fair ☐ Poor

Existing Annular Material (to the best of your knowledge)												
DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE (T)						FILTER PACK				
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	500					X			Top 20' Cemented			
500	505									X		Fine
505	800									X		Filter Pack

SECTION 5. ACTUAL WELL ABANDONMENT DESIGN (attach additional page if needed)		
Refer to ADWR's Well Abandonment Handbook for additional information	DEPTH TO WATER N/A Feet Below Land Surface	DATE ABANDONMENT COMPLETED 5.26.17


Casing Treatment						Sealing or Fill Material											
DEPTH FROM SURFACE		TREATMENT TYPE (T)				IF OTHER TYPE, DESCRIBE OR IF CASING WAS PERFORATED, DESCRIBE SPACING AND PERFORATIONS THAT WERE ADDED	DEPTH FROM SURFACE		MATERIAL TYPE (T)						MIXING RATIO by (check one) <input checked="" type="checkbox"/> Weight <input type="checkbox"/> Volume	VOLUME OF MATERIAL USED (cubic feet)	
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)		FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS			SAND
0	471				X		5	800	X								15:6 396

Actual Abandonment Method (See Well Abandonment Handbook)			Emplacement Method of Sealing or Fill Material	
CHECK ONE <input type="checkbox"/> Standard Method <input type="checkbox"/> Alternative 1 <input type="checkbox"/> Alternative 2 <input type="checkbox"/> Alternative 3 <input type="checkbox"/> Alternative 4 <input type="checkbox"/> Variance Option <input checked="" type="checkbox"/> Alternative 5 <input type="checkbox"/> Variance Option 1 <input type="checkbox"/> Variance Option 2 Variance Attached			CHECK ONE <input type="checkbox"/> Gravity <input type="checkbox"/> Pressure Grouting <input checked="" type="checkbox"/> Tremie Pumped <input type="checkbox"/> Other (please specify)	

REMARKS

I state that this is filed in compliance with A.R.S. § 45-594 and A.A.C. R12-15-816 and is complete and correct to the best of my knowledge and	
TYPE OR PRINT NAME AND TITLE <i>William E. Day</i>	SIGNATURE OF QUALIFYING PARTY <i>[Signature]</i> DATE <i>4-18-18</i>



 <b>Arizona Department of Water Resources</b> Groundwater Permitting and Wells Section P.O. Box 36020 Phoenix, Arizona 85067-6020 (602) 771-8527 • (602) 771-8690 fax • <a href="http://www.azwater.gov">www.azwater.gov</a> •	<b>Notice of Intention to Abandon a Well</b>		<b>FEE</b> <b>\$150.00</b>
	<b>TO BE COMPLETED BY ADWR</b>		<b>FILE NUMBER</b> D/C-9) 28CCA
❖ Review instructions and the Well Abandonment Handbook prior to completing form with black or blue ink. ❖ You <u>must</u> include with your Notice: ➢ Well construction diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6. ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104	<b>RECEIVED DATE</b> 3/8/17	<b>WATERSHED</b> —	<b>WELL REGISTRATION NUMBER</b> 55- 482738
	<b>ISSUED DATE</b> 3/6/17	<b>REMEDIAL ACTION SITE</b> —	

**SECTION 1. REGISTRY INFORMATION**

To determine the location of well, please refer to the Well Registry Map (<https://gisweb.azwater.gov/WellRegistry/Default.aspx>) and Google Earth (<http://www.earthpoint.us/Townships.aspx>)

<b>Well Type</b>		<b>Location of Well</b>					
CHECK ONE		WELL LOCATION ADDRESS (IF ANY) OR CROSS STREETS					
<input type="checkbox"/> Domestic <input checked="" type="checkbox"/> Monitor / Piezometer <input type="checkbox"/> Stock <input type="checkbox"/> Geotechnical <input type="checkbox"/> Irrigation <input type="checkbox"/> Mineral Exploration <input type="checkbox"/> Municipal <input type="checkbox"/> Other (please specify):							
ORIGINAL WELL OWNER (IF KNOWN)		TOWNSHIP (N/S)		RANGE (E/W)		SECTION	
Magma		4.0 S		9.0 E		28	
ORIGINAL WELL DRILLING FIRM (IF KNOWN)		160 ACRE		40 ACRE		10 ACRE	
Unknown		SW 1/4		SW 1/4		NE 1/4	
DRILL DATE (IF KNOWN)		COUNTY ASSESSOR'S PARCEL ID NUMBER		COUNTY WHERE WELL IS LOCATED			
1994		BOOK MAP PARCEL		PINAL			
		200 31 0200					
		LATITUDE		LONGITUDE			
		33 ° 2 ' 55.22 "N		111 ° 26 ' 6.32 "W			
		Degrees Minutes Seconds		Degrees Minutes Seconds			
		METHOD OF LATITUDE/LONGITUDE (check one)		<input type="checkbox"/> *GPS: Hand-Held			
		<input type="checkbox"/> Google Earth <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade					
		*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (check one)					
		<input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):					

**SECTION 2. OWNER INFORMATION**

<b>Land Owner</b>	<b>Well Owner</b> (check this box if Land Owner and Well Owner are same) <input checked="" type="checkbox"/>
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL	FULL NAME OF COMPANY, GOVERNMENT AGENCY, OR INDIVIDUAL
Florence Copper Inc.	Florence Copper Inc.
MAILING ADDRESS	MAILING ADDRESS
1575 W Hunt Hwy	1575 W Hunt Hwy
CITY / STATE / ZIP CODE	CITY / STATE / ZIP CODE
Florence, AZ 85123	Florence, AZ 85123
CONTACT PERSON NAME AND TITLE	CONTACT PERSON NAME AND TITLE
Ian Ream, Senior Hydrogeologist	Ian Ream, Senior Hydrogeologist
TELEPHONE NUMBER	TELEPHONE NUMBER
(520) 374-3984	(520) 374-3984
FAX NUMBER	FAX NUMBER
(520) 374-3999	(520) 374-3999

**SECTION 3. ABANDONMENT AUTHORIZATION**

<b>Drilling Firm</b>		<b>Consultant</b> (if applicable)	
NAME		CONSULTING FIRM	
National EWP, INC		Haley & Aldrich, Inc.	
DWR LICENSE NUMBER	ROC LICENSE CATEGORY	CONTACT PERSON NAME	
823	A-4	Mark Nicholls	
TELEPHONE NUMBER	EMAIL ADDRESS	TELEPHONE NUMBER	EMAIL ADDRESS
(480) 558-3500	jstephens@nationalewp.com	(602) 760-2423	MNicholls@haleyaldrich.com

**SECTION 4.**

Questions	Yes	No	If Yes:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be, or is contaminated?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	EXPLAIN (attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., Lot 3 Well, MW-1, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(please state) PW4-1
3. Was the well casing video logged?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	INCLUDE CD OR DVD OF VIDEO LOG WITH NOTICE OF INTENT
4. Why is the well being abandoned?	No longer in use		

RECEIVED

PERMIT GRANTED

MAR 03 2017

ADWR



# Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER

55 - 482738

## SECTION 5. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE				PERFORATION TYPE					SLOT SIZE IF ANY (inches)	
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED		IF OTHER TYPE, DESCRIBE
0	20	Unknown	0	20	12	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
20	800	Unknown	0	445	6	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
			445	800	6	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	bottom 20 feet blank	unknown

Condition of casing: (good, fair, poor, unknown) \_\_\_\_\_

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE								FILTER PACK		
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	20	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
20	445	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
445	800	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	top 5' fine

## SECTION 6. PROPOSED WELL ABANDONMENT DESIGN (attach additional page if needed)

DATE ABANDONMENT IS TO BEGIN

Refer to ADWR's [Well Abandonment Handbook](#) for additional information.

03/01/2017

Casing Treatment						Sealing or Fill Material															
DEPTH FROM SURFACE		TREATMENT TYPE				DEPTH FROM SURFACE		MATERIAL TYPE								MIXING RATIO by (check one) <input type="checkbox"/> Weight <input checked="" type="checkbox"/> Volume	ESTIMATED VOLUME OF MATERIAL (cubic feet)				
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)	IF OTHER TYPE, DESCRIBE OR IF CASING IS TO BE PERFORATED, DESCRIBE SPACING AND SIZE OF PERFORATIONS TO BE ADDED	FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS BENTONITE	GROUT			CHIPS	PELLETS	SAND	
0	420	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		5	800	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1:1	245
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

### Proposed Abandonment Method (See Well Abandonment Handbook)

CHECK ONE

☐ Standard Method    ☐ Alternative 4:    ☐ Other (please specify):

☐ Alternative 1    ☐ Variance Option \*

☐ Alternative 2    ☒ Alternative 5:

☐ Alternative 3    ☐ Variance Option 1\*    \* requires a letter requesting a variance

☐ Variance Option 2\*

### Emplacement Method of Sealing or Fill Material

CHECK ONE

☒ Tremie Pumped (Recommended)

☐ Gravity

☐ Pressure Grouting

☐ Other (please specify):

APPLICATION CONTINUES ON PAGE 3



**Notice of Intent to Abandon a Well**

WELL REGISTRATION NUMBER

55 - 482738

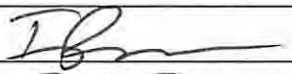
**SECTION 7. Well Abandonment Diagram**

Please use the space below to provide a well abandonment diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.

see attached

**SECTION 8. LAND OWNER AND WELL OWNER SIGNATURE**

I state that this notice is filed in compliance with A.R.S. § 45-596 and is complete and correct to the best of my knowledge and belief.

Land Owner	Well Owner (complete if Land Owner/Well Owner are NOT the same)
PRINT NAME AND TITLE Ian Ream, Senior Hydrogeologist	PRINT NAME AND TITLE
SIGNATURE OF LAND OWNER 	SIGNATURE OF WELL OWNER
DATE 3-2-2017	DATE
<input checked="" type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.	<input type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.
EMAIL ADDRESS IanReam@florencecopper.com	EMAIL ADDRESS

**ARIZONA DEPARTMENT OF WATER RESOURCES**  
1110 W. Washington St. Suite 310  
Phoenix, Arizona 85007

**ABANDON  
VARIANCE GRANTED**

THIS AUTHORIZATION SHALL BE IN POSSESSION OF THE DRILLER DURING ALL DRILLING OPERATIONS

WELL REGISTRATION NO: **55-482738**

AUTHORIZED DRILLER: **NATIONAL EWP, INC.**

LICENSE NO: **823**

NOTICE OF INTENTION TO ABANDON ENV - MONITOR WELL(S) HAS BEEN FILED WITH THE DEPARTMENT BY:

WELL OWNER: **FLORENCE COPPER, INC. 1575 W. HUNT HIGHWAY ATTN: IAN REAM, SR. HYDROGEOLOGIST FLORENCE, AZ, 85**

THE WELL(S) IS/ARE TO BE LOCATED IN THE:

**NE 1/4 of the SW 1/4 of the SW 1/4 Section 28 Township 4.0 SOUTH Range 9.0 EAST**

NO. OF WELLS IN THIS PROJECT:

ASSESSOR'S PARCEL NO: **200-31-020**

THIS AUTHORIZATION EXPIRES AT MIDNIGHT ON THE DAY OF



---

**GROUNDWATER PERMITTING AND WELLS**

THE DRILLER MUST FILE A WELL ABANDONMENT COMPLETION REPORT WITHIN 30 DAYS OF ABANDONMENT.





RECEIVED

APR 18 2017



**Arizona Department of Water Resources**  
Groundwater Permitting and Wells  
PO Box 36020 • Phoenix, Arizona 85067-6020  
(602) 771-8527 • 1-800-352-8488

**ADWR**  
**Well Abandonment Completion Report**

- ❖ Review instructions prior to completing form
- ❖ The drilling firm or single well licensee must file this report within 30 days of completion of abandonment. (A.R.S. § 45-594, A.A.C. R12-15-816)

\*\* PLEASE PRINT CLEARLY \*\*

FILE NUMBER

**D(4-9) 28 CCA**

WELL REGISTRATION NUMBER

**55 - 482738**

**SECTION 1. ABANDONMENT AUTHORIZATION**

**Drilling Firm**

<b>Mail To:</b>	NAME	DWR LICENSE NUMBER
	NATIONAL EWP, INC.	823
	ADDRESS	TELEPHONE NUMBER
	1200 W. SAN PEDRO ST.	480-558-3500
	CITY / STATE / ZIP	FAX
	GILBERT, AZ 85233	

**SECTION 2. REGISTRY INFORMATION**

**Well Owner Information**

FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL	CONTACT PERSON NAME AND TITLE
FLORENCE COPPER, INC.	Ian Ream Sr. Hydrogeologist
MAILING ADDRESS	TELEPHONE NUMBER
1575 W. HUNT HIGHWAY	520-374-3984
CITY / STATE / ZIP	FAX
FLORENCE, AZ 85132	520-374-3999

**Location of Well**

WELL LOCATION ADDRESS (IF ANY)						LATITUDE			LONGITUDE		
						33 °	2 '	55.22" N	111 °	26 '	6.32" W
						Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE	LAND SURFACE ELEVATION AT WELL					
4S	9E	28	SW 1/4	SW 1/4	NE 1/4	1471.8					
						Feet Above Sea Level					
COUNTY ASSESSOR'S PARCEL ID NUMBER						METHOD OF LATITUDE / LONGITUDE (Check One)					
BOOK						<input type="checkbox"/> GPS: Hand-Held <input type="checkbox"/> USGS Quad Map <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> GPS: Survey-Grade					
MAP						*If GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (Check One)					
200						<input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):					
PARCEL											
31						020					

**SECTION 3.**

Questions	Yes	No	Explanation:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be or is contaminated?		x	IF YES, EXPLAIN (Attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., MW-1, PZ-4, Lot 29 Well, Smith Well, etc.)	x		IF YES, PLEASE STATE PW4 - 1
3. Prior to abandonment, did the well have 20' of surface casing and 20' of grout in the annular space surrounding the casing?	x		If no, was the top 20' of casing removed prior to setting the cement plug? <input type="checkbox"/> Yes <input type="checkbox"/> No
4. Was the well backfilled above the cement plug?	x		
5. Was the well casing video logged?	x		
6. Why was the well abandoned?			
No longer in use.			

**SECTION 4. ORIGINAL WELL CONSTRUCTION DESIGN** (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE (T)				PERFORATION TYPE (T)					SLOT SIZE IF ANY (inches)	
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED		IF OTHER TYPE, DESCRIBE
0	20	17	0	20	12	x				x						
20	800	unknown	0	440	6		x			x						
			440	800	6		x							x		

Condition of casing: ☐ Good ☐ Fair ☐ Poor**Existing Annular Material** (to the best of your knowledge)

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE (T)							FILTER PACK		
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS			
0	20			x							
0	440					x					
440	800									x	

**SECTION 5. ACTUAL WELL ABANDONMENT DESIGN** (attach additional page if needed)

Refer to ADWR's Well Abandonment Handbook for additional information

DEPTH TO WATER  
228

Feet Below Land Surface

DATE ABANDONMENT COMPLETED  
3.2.2017

Casing Treatment							Sealing or Fill Material											
DEPTH FROM SURFACE		TREATMENT TYPE (T)					DEPTH FROM SURFACE		MATERIAL TYPE (T)								MIXING RATIO by (check one) <input checked="" type="checkbox"/> Weight <input type="checkbox"/> Volume	VOLUME OF MATERIAL USED (cubic feet)
		SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)	IF OTHER TYPE, DESCRIBE OR IF CASING WAS PERFORATED, DESCRIBE SPACING AND PERFORATIONS THAT WERE ADDED			NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS				
FROM (feet)	TO (feet)						GROUT	CHIPS						PELLETS				
0	440				x		0	440	x									
							440	800	x									270

**Actual Abandonment Method** (See Well Abandonment Handbook)

- CHECK ONE
- ☒ Standard Method ☐ Alternative 4 ☐ Other (please specify)
- ☐ Alternative 1 ☐ Variance Option
- ☐ Alternative 2 ☐ Alternative 5
- ☐ Alternative 3 ☐ Variance Option 1
- ☐ Variance Option 2

**Emplacement Method of Sealing or Fill Material**

- CHECK ONE
- ☐ Gravity
- ☐ Pressure Grouting
- ☒ Tremie Pumped
- ☐ Other (please specify)

REMARKS Abandon 800' back to 440' with neat cement. Drill out PVC to 440'. Cement back to surface with neat cement type V.

I state that this is filed in compliance with A.R.S. § 45-594 and A.A.C. R12-15-816 and is complete and correct to the best of my knowledge and

TYPE OR PRINT NAME AND TITLE

William Edley

SIGNATURE OF QUALIFYING PARTY

[Signature]

DATE

4-13-17



**Arizona Department of Water Resources**

Groundwater Permitting and Wells Section  
P.O. Box 36020 Phoenix, Arizona 85067-6020  
(602) 771-8527 • (602) 771-8690 fax  
• [www.azwater.gov](http://www.azwater.gov) •

RECEIVED

MAY 02 2018

**Notice of Intention to  
Abandon a Well**
**FEE**  
**\$150.00**

ADWR

- ❖ Review instructions and the Well Abandonment Handbook prior to completing form with black or blue ink.
- ❖ You must include with your Notice:
  - Well construction diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.
- ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104

<b>TO BE COMPLETED BY ADWR</b>		<b>FILE NUMBER</b>
AMMNA PINAL	BASIN PIN	SUBBASIN 11
RECEIVED DATE 5/2/18	WATERSHED 08	WELL REGISTRATION NUMBER
ISSUED DATE 5/4/18	REMEDIAL ACTION SITE —	55-627608

**SECTION 1. REGISTRY INFORMATION**

To determine the location of well, please refer to the Well Registry Map (<https://gisweb.azwater.gov/WellRegistry/Default.aspx>) and Google Earth (<http://www.earthpoint.us/Townships.aspx>)

<b>Well Type</b>		<b>Location of Well</b>					
CHECK ONE		WELL LOCATION ADDRESS (IF ANY) OR CROSS STREETS					
<input type="checkbox"/> Domestic <input type="checkbox"/> Monitor / Piezometer <input type="checkbox"/> Stock <input type="checkbox"/> Geotechnical <input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Mineral Exploration <input type="checkbox"/> Municipal <input type="checkbox"/> Other (please specify):							
ORIGINAL WELL OWNER (IF KNOWN) Conoco		TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE
		4.0 S	9.0 E	28	SW 1/4	SE 1/4	NW 1/4
ORIGINAL WELL DRILLING FIRM (IF KNOWN) L.C. Jones Drilling Co.		COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL	COUNTY WHERE WELL IS LOCATED				
		200 31 0200	PINAL				
DRILL DATE (IF KNOWN) November 1974		LATITUDE		LONGITUDE			
		33 ° 2 ' 54.81 "N		111 ° 26 ' 4.21 "W			
		Degrees Minutes Seconds		Degrees Minutes Seconds			
		METHOD OF LATITUDE/LONGITUDE (check one) <input type="checkbox"/> *GPS: Hand-Held					
		<input type="checkbox"/> Google Earth <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade					
		*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (check one)					
		<input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):					

**SECTION 2. OWNER INFORMATION**

<b>Land Owner</b>	<b>Well Owner</b> (check this box if Land Owner and Well Owner are same) <input checked="" type="checkbox"/>	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Florence Copper Inc.	FULL NAME OF COMPANY, GOVERNMENT AGENCY, OR INDIVIDUAL Florence Copper Inc.	
MAILING ADDRESS 1575 W. Hunt Hwy	MAILING ADDRESS 1575 W. Hunt Hwy	
CITY / STATE / ZIP CODE Florence, Arizona 85123	CITY / STATE / ZIP CODE Florence, Arizona 85123	
CONTACT PERSON NAME AND TITLE Ian Ream (Senior Hydrogeologist)	CONTACT PERSON NAME AND TITLE Ian Ream (Senior Hydrogeologist)	
TELEPHONE NUMBER (520) 374-3984	FAX NUMBER (520) 374-3999	

**SECTION 3. ABANDONMENT AUTHORIZATION**

<b>Drilling Firm</b>		<b>Consultant (if applicable)</b>	
NAME Hoover Drilling LLC		CONSULTING FIRM Haley & Aldrich, Inc.	
DWR LICENSE NUMBER 87	ROC LICENSE CATEGORY CR-53	CONTACT PERSON NAME Lauren Candreva	
TELEPHONE NUMBER (520) 251-1149	EMAIL ADDRESS tommy@hooverdrilling.com	TELEPHONE NUMBER (602) 760-2429	EMAIL ADDRESS lcandreva@haleyaldrich.com

**SECTION 4.**

Questions	Yes	No	If Yes:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be, or is contaminated?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	EXPLAIN (attach additional page if necessary)
2. Is there another well name or identification number associated with this well? (e.g., Lot 3 Well, MW-1, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(please state) WW3
3. Was the well casing video logged?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	INCLUDE CD OR DVD OF VIDEO LOG WITH NOTICE OF INTENT
4. Why is the well being abandoned?	No longer in use		



# Notice of Intent to Abandon a Well

WELL REGISTRATION NUMBER  
55 - 627608

## SECTION 5. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE				PERFORATION TYPE					SLOT SIZE IF ANY (inches)	
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED		IF OTHER TYPE, DESCRIBE
0	81	Unknown	0	81	24	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								
81	496	18	0 (240)*	496	18	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						<input checked="" type="checkbox"/>	Perf. from	240-496
496	933	14	496	933	14	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						<input checked="" type="checkbox"/>		Unknown

Condition of casing: (good, fair, poor, unknown) FAIR

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	81	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	

## SECTION 6. PROPOSED WELL ABANDONMENT DESIGN (attach additional page if needed)

Refer to ADWR's [Well Abandonment Handbook](#) for additional information.

DATE ABANDONMENT IS TO BEGIN

03/01/2017

Casing Treatment					Sealing or Fill Material															
DEPTH FROM SURFACE		TREATMENT TYPE				DEPTH FROM SURFACE		MATERIAL TYPE								MIXING RATIO by (check one) <input type="checkbox"/> Weight <input checked="" type="checkbox"/> Volume	ESTIMATED VOLUME OF MATERIAL (cubic feet)			
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)	IF OTHER TYPE, DESCRIBE OR IF CASING IS TO BE PERFORATED, DESCRIBE SPACING AND SIZE OF PERFORATIONS TO BE ADDED	FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS BENTONITE	GROUT			CHIPS	PELLETS	SAND
0	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		0	5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1:1	1336.3
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

### Proposed Abandonment Method (See Well Abandonment Handbook)

CHECK ONE

☐ Standard Method    ☐ Alternative 4:    ☐ Other (please specify):

☐ Alternative 1    ☐ Variance Option \*

☐ Alternative 2    ☒ Alternative 5:

☐ Alternative 3    ☐ Variance Option 1\*    \* requires a letter requesting a variance

☐ Variance Option 2\*

### Emplacement Method of Sealing or Fill Material

CHECK ONE

☒ Tremie Pumped (Recommended)

☐ Gravity

☐ Pressure Grouting

☐ Other (please specify):

APPLICATION CONTINUES ON PAGE 3



**Notice of Intent to Abandon a Well**

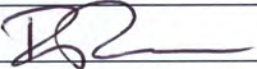
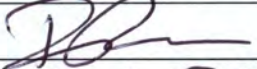
WELL REGISTRATION NUMBER

**55 - 627608****SECTION 7. Well Abandonment Diagram**

Please use the space below to provide a well abandonment diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.

**SECTION 8. LAND OWNER AND WELL OWNER SIGNATURE**

*I state that this notice is filed in compliance with A.R.S. § 45-596 and is complete and correct to the best of my knowledge and belief.*

Land Owner	Well Owner (complete if Land Owner/Well Owner are NOT the same)
PRINT NAME AND TITLE Ian Ream, Senior Hydrogeologist	PRINT NAME AND TITLE Ian Ream, Senior Hydrogeologist
SIGNATURE OF LAND OWNER 	SIGNATURE OF WELL OWNER 
DATE 5-1-2018	DATE 5-1-2018
<input type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.	<input checked="" type="checkbox"/> By checking this box, you agree to allow ADWR to contact you via electronic mail.
EMAIL ADDRESS	EMAIL ADDRESS IanReam@florencecopper.com



## Well Abandonment Completion Report

- ❖ Review instructions prior to completing form in black or blue ink.
- ❖ The drilling firm or single well licensee must file this report within 30 days of completion of abandonment. (A.R.S. § 45-594, A.A.C. R12-15-816)

\*\* PLEASE PRINT CLEARLY \*\*

FILE NUMBER

WELL REGISTRATION NUMBER

**55 - 627608**

### SECTION 1. ABANDONMENT AUTHORIZATION

#### Drilling Firm

<b>Mail To:</b>	NAME <b>Hoover Drilling LLC</b>	DWR LICENSE NUMBER <b>871</b>
	ADDRESS <b>1203 N Schultz St b</b>	TELEPHONE NUMBER <b>(520) 836-6400</b>
	CITY / STATE / ZIP <b>Casa Grande, AZ 85122</b>	FAX

### SECTION 2. REGISTRY INFORMATION

#### Well Owner Information

FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL <b>Florence Copper Inc.</b>	CONTACT PERSON NAME AND TITLE
MAILING ADDRESS <b>1575 W. Hunt Hwy</b>	TELEPHONE NUMBER <b>(520) 374-3984</b>
CITY / STATE / ZIP CODE <b>Florence, Arizona 85123</b>	FAX <b>(520) 374-3999</b>

#### Location of Well

WELL LOCATION ADDRESS (IF ANY)						LATITUDE <b>33 ° 2 ' 54.81"N</b> Degrees Minutes Seconds			LONGITUDE <b>111 ° 26 ' 4.21 "W</b> Degrees Minutes Seconds		
TOWNSHIP (N/S) <b>4 S</b>	RANGE (E/W) <b>9 E</b>	SECTION <b>28</b>	160 ACRE <b>SW ¼</b>	40 ACRE <b>SE ¼</b>	10 ACRE <b>NW ¼</b>	LAND SURFACE ELEVATION AT WELL Feet Above Sea Level					
COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK <b>200</b> MAP <b>31</b> PARCEL <b>0200</b>						METHOD OF LATITUDE/LONGITUDE (CHECK ONE) <input type="checkbox"/> *GPS: Hand-Held <input type="checkbox"/> USGS Quad Map <input checked="" type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade *IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (CHECK ONE) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):					

### SECTION 3.

Questions	Yes	No	Explanation:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be or is contaminated?		<input checked="" type="checkbox"/>	IF YES, EXPLAIN (ATTACH ADDITIONAL PAGE IF NECESSARY)
2. Is there another well name or identification number associated with this well? (e.g., MW-1, PZ-4, Lot 29 Well, Smith Well, etc.)			IF YES, PLEASE STATE <b>WW3</b>
3. Prior to abandonment, did the well have 20' of surface casing AND 20' of grout in the annular space surrounding the casing?	<input checked="" type="checkbox"/>		If no, was the top 20' of casing removed prior to setting the cement plug? <input type="checkbox"/> Yes <input type="checkbox"/> No
4. Was the well backfilled above the cement plug?	<input checked="" type="checkbox"/>		
5. Was the well casing video logged?	<input checked="" type="checkbox"/>		
6. Why was the well abandoned?	No longer in use		



## Well Abandonment Completion Report

WELL REGISTRATION NUMBER

55 - 627608

**SECTION 4. ORIGINAL WELL CONSTRUCTION DESIGN** (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE ( T )			PERFORATION TYPE ( T )					SLOT SIZE IF ANY (inches)		
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE		SLOTTED	IF OTHER TYPE, DESCRIBE
0	81	Unknown	0	81	24	x										
81	496	18	0	496	18	x							x		Perforations begin at 240	
496	933	14	496	933	14	x							x			

Condition of casing: ☐ Good ☒ Fair ☐ Poor**Existing Annular Material** (to the best of your knowledge)

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE ( T )								FILTER PACK		
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	81			x								

**SECTION 5. ACTUAL WELL ABANDONMENT DESIGN** (attach additional page if needed)

Refer to ADWR's Well Abandonment Handbook for additional information.

DEPTH TO WATER

230 Feet Below Land Surface

DATE ABANDONMENT COMPLETED

5/23/2018

Casing Treatment						Sealing or Fill Material														
DEPTH FROM SURFACE		TREATMENT TYPE ( T )				DEPTH FROM SURFACE		MATERIAL TYPE ( T )								MIXING RATIO by (check one) <input type="checkbox"/> Weight <input checked="" type="checkbox"/> Volume	VOLUME OF MATERIAL USED (cubic feet)			
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)	IF OTHER TYPE, DESCRIBE OR IF CASING WAS PERFORATED, DESCRIBE SPACING AND SIZE OF PERFORATIONS THAT WERE ADDED	FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS BENTONITE	GROUT			CHIPS	PELLETS	SAND
0	5				x		5	933	x										1:1	1485

**Actual Abandonment Method** (See Well Abandonment Handbook)

CHECK ONE

- ☐ Standard Method    ☐ Alternative 4:    ☐ Other (please specify):  
☐ Alternative 1    ☐ Variance Option  
☐ Alternative 2    ☒ Alternative 5:    **Blast Perforate**  
☐ Alternative 3    ☐ Variance Option 1  
☐ Variance Option 2

**Emplacement Method of Sealing or Fill Material**

CHECK ONE

- ☐ Gravity  
☐ Pressure Grouting  
☒ Tremie Pumped  
☐ Other (please specify):

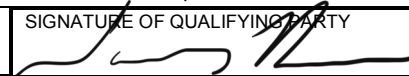
REMARKS

I state that this notice is filed in compliance with A.R.S. § 45-594 and A.A.C. R12-15-816 and is complete and correct to the best of my knowledge and belief.

TYPE OR PRINT NAME AND TITLE

Tommy Hoover (Owner)

SIGNATURE OF QUALIFYING PARTY



DATE

10/31/18